Image# 14978125899 PAGE 1 / 44

## **FEC** FORM 3X

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

TOTIM OX	or Other Than An Aut	norized Committee	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
HCR MANOR CARE PA	AC		
ADDRESS (number and street)	333 NORTH SUMMIT STR	EET	
<b>V</b>	16TH FLOOR		
Check if different than previously reported. (ACC)	TOLEDO		OH 43604 -
2. FEC IDENTIFICATION NU	MBER ▼ CI	TΥ▲	STATE ▲ ZIP CODE ▲
C C00260141		S THIS REPORT X (N) O	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (Mr 20 (M3) Jun 20 (M	(Non-Election Year Only)  Sen 20 (M9)  Dec 20 (M12)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (Q1		20 (M4) Jul 20 (M	7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2	(C) 12-Day	Primary (12P)  Convention (12C)	General (12G) Runoff (12R)  Special (12S)
Cottober 15 Quarterly Report (Q3)	·	Convention (120)	Special (123)
January 31 Year-End Report (YE		on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election  Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 07	/ D D / Y Y Y Y Y Y 2014	through 09	M / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this	s Report and to the best of	f my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	Mr. Kevin Jackson		
Signature of Treasurer Mr. Ke	evin Jackson	[Electronically Filed]	Date 10 / 11 / 2014
NOTE: Submission of false, errone	ous, or incomplete informatio	on may subject the person signin	g this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name HCR MANOR CARE PAC 07 2014 09 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 11344.69 January 1, 2014 (b) Cash on Hand at 11989.51 Beginning of Reporting Period..... 143003.14 32158.07 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 44147.58 154347.83 6(a) and 6(c) for Column B)..... 34727.03 144927.28 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 9420.55 9420.55 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### HCR MANOR CARE PAC

Receipts  her than loans) From: Persons Other al Committees (use Schedule A)  add (a)(i) and (ii)  ty Committees al Committees al Committees butions (add Lines and (c)) (Carry as 33, page 5)  Affiliated/Other  ts Received  at Received  ts Received	COLUMN A Total This Period  24201.20  3922.96  28124.16  0.00  28124.16  0.00  0.00  0.00	COLUMN B Calendar Year-to-Date  103188.82  20778.51  123967.33  0.00  123967.33  0.00  0.00  0.00
Persons Other al Committees (use Schedule A)	3922.96 28124.16 0.00 0.00 28124.16 0.00	20778.51 123967.33 0.00 0.00 123967.33 0.00
al Committees  (use Schedule A)  add  (a)(i) and (ii)  ty Committees  al Committees  cal Committees  Cs)  butions (add Lines  and (c)) (Carry  as 3, page 5)  Affiliated/Other  s  as Received	3922.96 28124.16 0.00 0.00 28124.16 0.00	20778.51 123967.33 0.00 0.00 123967.33 0.00
(use Schedule A)	3922.96 28124.16 0.00 0.00 28124.16 0.00	20778.51 123967.33 0.00 0.00 123967.33 0.00
ty Committees	3922.96 28124.16 0.00 0.00 28124.16 0.00	20778.51 123967.33 0.00 0.00 123967.33 0.00
add (a)(i) and (ii)	28124.16 0.00 0.00 28124.16 0.00 0.00	123967.33 0.00 0.00 123967.33 0.00 0.00
add (a)(i) and (ii)	28124.16 0.00 0.00 28124.16 0.00 0.00	123967.33 0.00 0.00 123967.33 0.00 0.00
ty Committees	0.00 0.00 28124.16 0.00	0.00 0.00 123967.33 0.00
ty Committees  cal Committees  cutions (add Lines  cutions (add Lines)  cutions (add Lines  cutions (add Lines)  cutions (add Lines .	0.00 0.00 28124.16 0.00	0.00 0.00 123967.33 0.00
al Committees Cs)  putions (add Lines , and (c)) (Carry le 33, page 5)  Affiliated/Other s	0.00 28124.16 0.00 0.00	0.00 123967.33 0.00
al Committees Cs)  putions (add Lines , and (c)) (Carry le 33, page 5)  Affiliated/Other s	28124.16 0.00 0.00	123967.33 0.00 0.00
ccs)	28124.16 0.00 0.00	123967.33 0.00 0.00
outions (add Lines , and (c)) (Carry lee 33, page 5)  Affiliated/Other s  red	0.00	0.00
ae 33, page 5)	0.00	0.00
Affiliated/Other sed	0.00	0.00
red	0.00	0.00
redts Received	0.00	0.00
ts Received		
ts Received		
	0.00	0.00
	0.00	0.00
iting Expenditures		7 7 7
es, etc.)	0.00	0.00
Line 37, page 5)	0.00	0.00
The second secon	4033.50	19033.50
	, 1000.00	
-	0.41	2.31
Account		
ule H3)	0.00	0.00
	, , , , , , , , , , , , , , , , , , , ,	
(from Schedule H5)	0.00	0.00
's (add 18(a) and 18(b))	0.00	0.00
rice	ributions Made idates and Other lees	ributions Made idates and Other dees

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures:  (a) Allocated Federal/Non-Federal	Total Tillo I Cilou	Calelidal Teat-10-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating  Expenditures	227.03	482.28		
(c) Total Operating Expenditures	7	102.20		
(add 21(a)(i), (a)(ii), and (b))▶	227.03	482.28		
Transfers to Affiliated/Other Party				
Contributions to	0.00	0.00		
Contributions to Federal Candidates/Committees	20000.00	104400.00		
and Other Political Committees	28000.00	124100.00		
Independent Expenditures	0.00	0.00		
(use Schedule E)	7 7			
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(*** **********************************	7			
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
(a) Individuals/Persons Other	0.00	0.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees		7 7		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds	0.00	0.00		
(add Lines 28(a), (b), and (c))▶	7	7		
Other Disbursements	6500.00	20345.00		
Other Biosurgemente	3			
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(ii) Levin Share(b) Federal Election Activity Paid Entirely	3.00			
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,	2000			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	34727.03	144927.28		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	34727.03	144927.28		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	28124.16	123967.33
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28124.16	123967.33
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	227.03	482.28
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	227.03	482.28

Use separate schedule(s) for each category of the Detailed Summary Page

F	FOR LINE NUMBER:					PAGE	6	OF	44
(check only one)									
	×	11a		11b		11c	12		
		13		14		15	16		17

	Statements may not be sold or used by any persolename and address of any political committee to				
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC					
Full Name (Last, First, Middle Initial)  Martin D Allen  Mailing Address 7151 Whispering Oak	Date of Receipt				
City	State Zip Code	09 30 2014 Transaction ID : SA11AI.38583			
Sylvania	OH 43560	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	192.25			
Name of Employer  HCR ManorCare Inc.  Receipt For:	Occupation  AVP / Dir Internal Aud & Risk	Contribution			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.97				
Full Name (Last, First, Middle Initial)  Jeffrey R Amann  Mailing Address 5400 Newton Ave. South		Date of Receipt			
Mailing Address 5100 Newton Ave. South  City	State Zip Code	09 30 2014 Transaction ID : SA11AI.38585			
Minneapolis	MN 55419	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	455.00			
Name of Employer HCR ManorCare	Occupation Regional Director of Operation	Contribution			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  843.38				
Full Name (Last, First, Middle Initial)  C. Nancy Ayers		Date of Receipt			
Mailing Address 5184 N Quail Crest Dr		09 30 2014			
City Grand Rapids	State Zip Code MI 49546	Transaction ID : SA11AI.38590  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	240.00			
Name of Employer	Occupation	Contribution			
HCR Manor Care Receipt For:	Administrator				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 486.40				
SUBTOTAL of Receipts This Page (optional)		887.25			
TOTAL This Period (last page this line number	only)				

Use separate schedule(s) for each category of the Detailed Summary Page

FO	FOR LINE NUMBER:						7	OF	44
(check only one)									
E	<b>1</b> 1a		11b		11c		12	2	
	13		14		15		16	6	17

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC	· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial)  Ms Tammy Barker  Mailing Address 4521 Sutton Rd  City Britton  FEC ID number of contributing federal political committee.  Name of Employer  HCR Manor Care, LLC.  Receipt For:  Primary General Other (specify)	State Zip Code MI 49229  C  Occupation AVP - Quality Support Svcs  Aggregate Year-to-Date ▼  648.46	Date of Receipt  9 30 2014  Transaction ID: SA11AI.38595  Amount of Each Receipt this Period  308.90  Contribution
Full Name (Last, First, Middle Initial)  Ms. Jocelyn D. Barnes  Mailing Address 9108 Shadowbrook Trail  City Orlando  FEC ID number of contributing federal political committee.  Name of Employer HCR.ManorCare, Inc.  Receipt For:  Primary General Other (specify)	State Zip Code FL 32825  C  Occupation Regional Director of Operations  Aggregate Year-to-Date ▼  701.84	Date of Receipt  09 30 2014  Transaction ID: SA11AI.38597  Amount of Each Receipt this Period  367.28  Contribution
Full Name (Last, First, Middle Initial)  Joseph Barrick  Mailing Address 448 Woodcrest Drive  City  Mechanicsburg  FEC ID number of contributing federal political committee.  Name of Employer  HCR Manor Care, Inc.  Receipt For:  Primary  General  Other (specify)	State Zip Code PA 17050  C  Occupation Administrator - York South  Aggregate Year-to-Date ▼  494.18	Date of Receipt  9 30 2014  Transaction ID: SA11AI.38600  Amount of Each Receipt this Period  175.44  Contribution
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	851.62

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FOR LINE	NUMBER	: PAGE	E 8 OF	44			
	(check only one)							
	<b>X</b> 11a	11b	11c	12				
	13	14	15	16	17			

	Statements may not be sold or used by any persolen name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Lynne M Bauerschmidt  Mailing Address 7060 Middlebury  City  Lambertville  FEC ID number of contributing federal political committee.  Name of Employer  HCR ManorCare Inc.  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48144  C  Occupation Internal Training Lead  Aggregate Year-to-Date ▼  575.00	Date of Receipt  9 30 2014  Transaction ID: SA11AI.38601  Amount of Each Receipt this Period  245.00  Contribution
Full Name (Last, First, Middle Initial)  Ms Julie Beckert  Mailing Address 3911 Buell  City Toledo  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary  General  Other (specify)	State Zip Code OH 43613  C  Occupation Director of Marketing  Aggregate Year-to-Date ▼  500.00	Date of Receipt  99 30 2014  Transaction ID: SA11AI.38605  Amount of Each Receipt this Period  150.00  Contribution
Full Name (Last, First, Middle Initial)  Ruby G Boice  Mailing Address 10445 Dexter Drive E  City Jacksonville  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary Other (specify)	State Zip Code FL 32218  C  Occupation Director Reg. Business Office Support  Aggregate Year-to-Date ▼  210.00	Date of Receipt  9 30 2014  Transaction ID: SA11AI.38610  Amount of Each Receipt this Period  105.00  Contribution
SUBTOTAL of Receipts This Page (optional)		500.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 9 OF Use separate schedule(s) for each category of the Detailed Summary Page

(check only one)								
	×	11a		11b		11c	12	
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Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
/		
Full Name (Last, First, Middle Initial)  1. Joey Lee Boyles		Date of Receipt
Mailing Address 567 Smalls Ferry Road		09 30 _ 2014 _
City	State Zip Code	Transaction ID : SA11AI.38613
New Castle	PA 16102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	72.00
Name of Employer	Occupation	Contribution
HCR Manor Care	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 5	
Other (specify) ▼	206.00	
Full Name (Last, First, Middle Initial)  3. David Burke		Date of Receipt
Mailing Address 425 Kingwood Rd		M M / D D / Y Y Y Y Y
City	State Zip Code	09 30 2014 Transaction ID : \$41141 38616
Linthicum Heights	MD 21090	Transaction ID : SA11AI.38616  Amount of Each Receipt this Period
	1.000	Amount of Lacif neceipt this Period
FEC ID number of contributing federal political committee.	C	123.09
Name of Employer	Occupation	Contribution
HCR ManorCare Inc.	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	584.73	
Full Name (Last, First, Middle Initial)  Denise F Curry		Date of Receipt
Mailing Address 503 Vilsack Road		09 30 2014
City	State Zip Code	7 Transaction ID : SA11AI.38623
Allegheny	PA 15116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	444.22
Name of Employer	Occupation	Contribution
HCR. Manor Care, Inc		
Receipt For:	Manager  Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	698.06	
SUBTOTAL of Receipts This Page (optional)		639.31
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 10 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Melinda Dechert Date of Receipt Mailing Address 3703 Kersten Dr 30 2014 09 City State Zip Code Transaction ID: SA11AI.38626 CA San Jose 95124 Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Contribution Name of Employer Occupation Administrator HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert DiFlippo Date of Receipt Mailing Address 1812 Windermere Avenue 09 30 2014 City State Zip Code Transaction ID: SA11AI.38627 DE Wilmington 19804 Amount of Each Receipt this Period FEC ID number of contributing 56.00 federal political committee. Contribution Name of Employer Occupation **HCR ManorCare** Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 212.00 Other (specify) Full Name (Last, First, Middle Initial) c. David K Donin Date of Receipt Mailing Address 11608 Everglade Court 30 09 2014 City State Zip Code Transaction ID: SA11AI.38628 MD North Potomac 20878 Amount of Each Receipt this Period FEC ID number of contributing 24.00 С federal political committee. Contribution Name of Employer Occupation Administrator HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 314.16 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	FOR LINE N	NUMBER:	PAGE	E 11 OF	= 4			
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	X 11a	11b	11c	12				
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or for	commercial purposes, other than using the	name and address of any political committee to	
\	CR MANOR CARE PAC		
<b>4</b> Li	II Name (Last, First, Middle Initial) inda J Emmett ailing Address 10408 Meadowlark Ct. East		Date of Receipt
_		Otata 77 Oct	09 30 2014
Cit Bo	ty onney Lake	State Zip Code WA 98391	Transaction ID : SA11AI.38632  Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C	525.00
НС	me of Employer CR ManorCare Inc.	Occupation Regional Director of Operations	Contribution
Re	eceipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
3. <u>L</u> i	Il Name (Last, First, Middle Initial) isa Evans		Date of Receipt
Cit	ailing Address 24013 22nd Ave West	State Zip Code WA 98021	09 30 2014  Transaction ID : SA11AI.38633  Amount of Each Receipt this Period
FE fed	C ID number of contributing deral political committee.	C	150.00 Contribution
НС	me of Employer CR Manor Care	Occupation Administrator	Contribution
Re	eceipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
	Il Name (Last, First, Middle Initial)  Kristen Felker		Date of Receipt
_	ailing Address 1647 West Addison 3B		09 30 / 2014
Cit Cl	ty hicago	State Zip Code IL 60613	Transaction ID : SA11AI.38634  Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C	129.75
	me of Employer	Occupation	Contribution
	CR ManorCare  accipt For:  Primary General  Other (specify) ▼	Manager  Aggregate Year-to-Date ▼  467.10	
SUP	TOTAL of Receipts This Page (optional)		804.75
101/	AL This Period (last page this line number o	riiy)	

FOR LINE NUMBER: PAGE 12 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) R Michael Ferguson Date of Receipt Mailing Address 2450 Underhill Rd 30 2014 09 City Zip Code State Transaction ID: SA11AI.38635 OH Toledo 43615 Amount of Each Receipt this Period FEC ID number of contributing C 673.05 federal political committee. Contribution Name of Employer Occupation VP & Dir of Purchasing HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1730.70 Other (specify) Full Name (Last, First, Middle Initial) B. John F Gallick Date of Receipt Mailing Address 392 Castle Crest Road 09 30 2014 City State Zip Code Transaction ID: SA11AI.38643 CA Alamo 94507 Amount of Each Receipt this Period FEC ID number of contributing 105.00 federal political committee. Contribution Name of Employer Occupation HCR ManorCare Inc. Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 355.00 Other (specify) Full Name (Last, First, Middle Initial) c. Marty Grabijas Date of Receipt Mailing Address 2682 Ravine Side North 30 09 2014 City Zip Code State Transaction ID: SA11AI.38649 MI Howell 48843 Amount of Each Receipt this Period FEC ID number of contributing 484.61 С federal political committee. Contribution Name of Employer Occupation HCR.ManorCare,Inc. **Director of Market Development** Receipt For: Aggregate Year-to-Date ▼ Primary General 484.61 Other (specify) 1262.66 SUBTOTAL of Receipts This Page (optional).....

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	FOF	R LINE	NU	<b>MBER</b>	:	PAGE	•	13 OF	44
Use separate schedule(s)	(che	ck only	or or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c		12	
		13		14		15		16	17

	Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Ruth G Graziano  Mailing Address 503 Elk Mills Road  City Oxford	State Zip Code PA 19363	Date of Receipt  09 30 2014  Transaction ID: SA11AI.38650  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  HCR ManorCare Inc.  Receipt For:  Primary General  Other (specify)	Occupation Regional Director of Operation  Aggregate Year-to-Date   1006.00	Contribution
Full Name (Last, First, Middle Initial)  3. Karen Harris  Mailing Address 8250 SW 8th St  City  North Lauderdale	State Zip Code FL 33068	Date of Receipt  09 30 2014  Transaction ID: SA11AI.38653  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify)	Occupation Assistant Administrator  Aggregate Year-to-Date   938.42	Amount of Each Receipt this Period  350.00  Contribution
Full Name (Last, First, Middle Initial)  Mr. Alan Hash  Mailing Address 9496 South Dunbar Circle  City South Jordan  FEC ID number of contributing federal political committee.  Name of Employer  HCR Manor Care, Inc.  Receipt For:  Primary General Other (specify)	State Zip Code UT 84095  C  Occupation Regional Director - Western Division 5  Aggregate Year-to-Date ▼  1800.00	Date of Receipt  09 30 2014  Transaction ID: SA11AI.38654  Amount of Each Receipt this Period  480.00  Contribution
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	1180.00
TOTAL This Period (last page this line number	er only)	

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 14 OF 44

TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check onl	ly one)	11c	12	
Any information copied from such Reports and S	tatements ma	, -	13	14 nurnose of s	15	16	17
or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC							
Full Name (Last, First, Middle Initial) <b>A.</b> Kevin C Henricks			Date o	f Receipt			
Mailing Address 23636 W. Chicago St. Unit 10	2		09	30	/ Y	2014	Y
City Plainfield	State IL	Zip Code 60544	Trans	saction ID : S		38656	
FEC ID number of contributing federal political committee.	С			-,	-1	287.	00
Name of Employer  HCR ManorCare Inc.  Receipt For:		rector of Operation	Contribu	ution			
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 659.00					
Full Name (Last, First, Middle Initial)  3. Jason Hohlefelder			Date o	f Receipt			
Mailing Address 8103 Alimoore Green			08	/ D D D 29	/ Y	2014	Y
City Dublin	State OH	Zip Code 43016		saction ID : S			
FEC ID number of contributing federal political committee.	С			7	-	1200.	00
Name of Employer HCR ManorCare	Occupation Regional Di	rector of Operations					
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00					
Full Name (Last, First, Middle Initial)  C. Rebecca Hollingsead			Date o	f Receipt			
Mailing Address 558 N Hillcrest			09	30	/ Y	2014	Y
City Decatur	State IL	Zip Code 62522		saction ID : S			
FEC ID number of contributing federal political committee.	С			-,-		658.	00
Name of Employer		Contribu	ution				
HCR Manor Care	Director Cli	nical Services					
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1257.04					
SUBTOTAL of Receipts This Page (optional)			Γ:	1.00.1.1	- 46	2145.	00
TOTAL This Period (last page this line number		·		,	,		

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Sharon E Hollins Date of Receipt Mailing Address 3311 Gallatin Rd 30 2014 09 City Zip Code State Transaction ID: SA11AI.38662 OH Toledo 43606 Amount of Each Receipt this Period FEC ID number of contributing C 538.44 federal political committee. Contribution Name of Employer Occupation Assistant General Counsel HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 538.44 Other (specify) Full Name (Last, First, Middle Initial) B. Lynn M Hood Date of Receipt Mailing Address 15415 Meadow Wood Dr 09 30 2014 City State Zip Code Transaction ID: SA11AI.38663 FL Wellington 33414 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Contribution Name of Employer Occupation HCR ManorCare Inc. Asst General Mgr Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kathryn Hoops Date of Receipt Mailing Address 24708 McCutchenville Road 30 09 2014 City State Zip Code Transaction ID: SA11AI.38664 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing 807.66 С federal political committee. Contribution Name of Employer Occupation VP of Tax HCR.ManorCare, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 2192.22 Other (specify) 1646.10 SUBTOTAL of Receipts This Page (optional).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Mr. John Huber Date of Receipt Mailing Address 26448 Carronade Drive 30 2014 09 City Zip Code State Transaction ID: SA11AI.38669 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing C 175.00 federal political committee. Contribution Name of Employer Occupation Regional Director of Operations HCR.ManorCare. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms Kate Gieroczynski Huck Date of Receipt Mailing Address 65 Washington St 09 30 2014 City State Zip Code Transaction ID: SA11AI.38670 PA **Topton** 19562 Amount of Each Receipt this Period FEC ID number of contributing 177.66 federal political committee. Contribution Name of Employer Occupation HCR ManorCare, LLC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 482.22 Other (specify) Full Name (Last, First, Middle Initial) c. Patricia Hudson Date of Receipt Mailing Address 1733 Ashfield Dr 30 09 2014 City Zip Code State Transaction ID: SA11AI.38671 OH Maumee 43537 Amount of Each Receipt this Period FEC ID number of contributing 168.00 С federal political committee. Contribution Name of Employer Occupation Reg. Director of 4H HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 456.00 Other (specify) 520.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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Use separate schedule(s)	(check onl	y one)		
for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12
	13	1/	15	16

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Carla Davis Hughes		Date of Receipt
Mailing Address 745 Washington Street #603		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Toledo	State Zip Code OH 43604	Transaction ID : SA11AI.38672  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	0.04
Name of Employer  HCR Manor Care, Inc.  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Occupation  VP of Sales- Mktg - HHHH  Aggregate Year-to-Date ▼  461.56	Contribution
Full Name (Last, First, Middle Initial)  Rebecca S Jablon  Mailing Address 3349 Fairbanks Ave		Date of Receipt
City TOLEDO	State Zip Code OH 43615	09 30 2014  Transaction ID : SA11AI.38674  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer HCR ManorCare Inc.	Occupation Admin Dir Of Nursing Serv	Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial)  C. Ms Diane Johnson		Date of Receipt
Mailing Address 206 Ruth Road		09 30 2014
City Fleetwood	State Zip Code PA 19522	Transaction ID : SA11AI.38678  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	Contribution
HCR.ManorCare, Inc.  Receipt For:  Primary General  Other (specify) ▼	Regional Director of Operations  Aggregate Year-to-Date ▼  1085.00	
SUBTOTAL of Receipts This Page (optional).		515.04
TOTAL This Period (last page this line number	er only)	

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Use separate schedule(s)	(check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	12	
	13 14	15	16	17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Daniel L Johnston  Mailing Address 1027 N 3rd Street		Date of Receipt
City	State Zip Code	09 30 2014 Transaction ID : SA11Al.38679
St Charles	MO 63301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	190.38
Name of Employer	Occupation	Contribution
HCR ManorCare	Manager	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 951.90	
Full Name (Last, First, Middle Initial)  Robert G Julius		Date of Receipt
Mailing Address 3321 Pelham Rd		09 30 _2014 _
City	State Zip Code	Transaction ID : SA11AI.38681
Ottawa Hills	OH 43606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	484.61
Name of Employer	Occupation	Contribution
HCR Manor Care, Inc.	Mgr. Business Office Process Dev.	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1130.79	
Full Name (Last, First, Middle Initial)  Tara Kaplan		Date of Receipt
Mailing Address 2118 N 62nd Street		09 30 2014
City	State Zip Code WA 98103	Transaction ID : SA11AI.38683
Seattle	WA 98103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	Contribution
HCR ManorCare	Admissions Director	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	749.99
TOTAL This Period (last page this line number	only)	

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Linda Karling-Lott Date of Receipt Mailing Address 4361 Conrwallis Ct 30 2014 09 City State Zip Code Transaction ID: SA11AI.38684 GA Marietta 30068 Amount of Each Receipt this Period FEC ID number of contributing C 216.00 federal political committee. Contribution Name of Employer Occupation Administrator HCR Manor Care. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 679.80 Other (specify) Full Name (Last, First, Middle Initial) B. Rodney S Keefer Date of Receipt Mailing Address 15126 Ridgeview Dr 09 30 2014 City State Zip Code Transaction ID: SA11AI.38685 IΑ Clive 50325 Amount of Each Receipt this Period FEC ID number of contributing C 140.00 federal political committee. Contribution Name of Employer Occupation HCR Manor Care, Inc. Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dan Kight Date of Receipt Mailing Address 2013 Orchard Rd 30 09 2014 City State Zip Code Transaction ID: SA11AI.38687 OH Toledo 43606 Amount of Each Receipt this Period FEC ID number of contributing 140.00 С federal political committee. Contribution Name of Employer Occupation Mgr^ Pharmacy Ops Sprt HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 496.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 20 OF 44 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Mark Kruzel Date of Receipt Mailing Address 26215 Black Oak Ct 30 2014 09 City State Zip Code Transaction ID: SA11AI.38694 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing C 140.00 federal political committee. Contribution Name of Employer Occupation HCR ManorCare Accounting Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Elliot Lekawa Date of Receipt Mailing Address 13690 Highland Springs Ct 09 30 2014 City State Zip Code Transaction ID: SA11AI.38695 Wichita KS 67235 Amount of Each Receipt this Period FEC ID number of contributing 304.50 federal political committee. Contribution Name of Employer Occupation HCR Manor Care, LLC. **RDO** Receipt For: Aggregate Year-to-Date ▼ Primary General 733.50 Other (specify) Full Name (Last, First, Middle Initial) **c.** Ryan Locy Date of Receipt Mailing Address 1425 Cody Parkway Apt. D 30 09 2014 City Zip Code State Transaction ID: SA11AI.38697 WI Platteville 53818 Amount of Each Receipt this Period FEC ID number of contributing 179.27 С federal political committee. Contribution Name of Employer Occupation Administrator HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 460.62 Other (specify) 623.77 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Diane Lube Date of Receipt Mailing Address 1830 Essex Pl 30 2014 09 City State Zip Code Transaction ID: SA11AI.38698 **Downers Grove** IL 60516 Amount of Each Receipt this Period FEC ID number of contributing C 108.00 federal political committee. Contribution Name of Employer Occupation Administrator HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 321.00 Other (specify) Full Name (Last, First, Middle Initial) B. Linda Mason Date of Receipt Mailing Address 3126 Diehn Ave 09 30 2014 City State Zip Code Transaction ID: SA11AI.38702 IΑ Davenport 52802 Amount of Each Receipt this Period FEC ID number of contributing C 140.00 federal political committee. Contribution Name of Employer Occupation HCR Manor Care, Inc. Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Frances Mastel Date of Receipt Mailing Address 1807 Derian Drive 30 09 2014 City State Zip Code Transaction ID: SA11AI.38703 SD Aberdeen 57401 Amount of Each Receipt this Period FEC ID number of contributing 105.00 С federal political committee. Contribution Name of Employer Occupation Administrator HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 353.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 22 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Jill Matelan Date of Receipt Mailing Address 312 N. Franklin St 30 2014 09 City State Zip Code Transaction ID: SA11AI.38704 PΑ Fleetwood 19522 Amount of Each Receipt this Period FEC ID number of contributing C 203.00 federal political committee. Contribution Name of Employer Occupation Administrator - Sinking Spring HCR Manor Care. Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 522.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Murry Mercier Date of Receipt Mailing Address 7110 Oak Bluff Lane 09 30 2014 City State Zip Code Transaction ID: SA11AI.38708 OH 43537 Maumee Amount of Each Receipt this Period FEC ID number of contributing C 1330.00 federal political committee. Contribution Name of Employer Occupation HCR Manor Care, Inc. VP - Information Systems Receipt For: Aggregate Year-to-Date ▼ Primary General 3610.00 Other (specify) Full Name (Last, First, Middle Initial) c. Daniel J Mikus Date of Receipt Mailing Address 809 Oak Avenue 30 09 2014 City State Zip Code Transaction ID: SA11AI.38710 NJ Linwood 08221 Amount of Each Receipt this Period FEC ID number of contributing 170.17 С federal political committee. Contribution Name of Employer Occupation Administrator HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 391.03 Other (specify) 1703.17 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 23 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Debra Miles Date of Receipt Mailing Address 7448 Hickory Valley Drive 30 2014 09 City Zip Code State Transaction ID: SA11AI.38712 OH Maumee 43537 Amount of Each Receipt this Period FEC ID number of contributing C 350.00 federal political committee. Contribution Name of Employer Occupation AVP & Director of Accounting HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 760.76 Other (specify) Full Name (Last, First, Middle Initial) B. Scott Miller Date of Receipt Mailing Address 198 Old Mill Drive 09 30 2014 City State Zip Code Transaction ID: SA11AI.38715 PA Langhorne 19047 Amount of Each Receipt this Period FEC ID number of contributing C 136.88 federal political committee. Contribution Name of Employer Occupation HCR ManorCare Inc. Sr Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 771.44 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Moser Date of Receipt Mailing Address 1404 Riverwalk Court 30 09 2014 City State Zip Code Transaction ID: SA11AI.38718 OH Waterville 43566 Amount of Each Receipt this Period FEC ID number of contributing C 134.61 federal political committee. Contribution Name of Employer Occupation HCR ManorCare Inc. Manager Employee Services Receipt For: Aggregate Year-to-Date ▼ Primary General 269.22 Other (specify) 621.49 SUBTOTAL of Receipts This Page (optional).....

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## SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Mr. Tom Myers Date of Receipt Mailing Address 24927 Prairie Crossing 30 2014 09 City Zip Code State Transaction ID: SA11AI.38720 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing C 210.00 federal political committee. Contribution Name of Employer Occupation Director of Ops Support - Central HCR Manor Care. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 524.00 Other (specify) Full Name (Last, First, Middle Initial) B. Nashika T O'Gilvie Date of Receipt Mailing Address 1823 N. Congress Ave 09 30 2014 City State Zip Code Transaction ID: SA11AI.38726 West Palm Beach FL 33401 Amount of Each Receipt this Period FEC ID number of contributing 99.42 federal political committee. Contribution Name of Employer Occupation HCR Manor Care, Inc. Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 298.26 Other (specify) Full Name (Last, First, Middle Initial) c. Eric O'Neill Date of Receipt Mailing Address 4009 East Braeburn Dr 30 09 2014 City Zip Code State Transaction ID: SA11AI.38728 WI Appleton 54913 Amount of Each Receipt this Period FEC ID number of contributing 280.00 С federal political committee. Contribution Name of Employer Occupation Regional Director of Operation HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 760.00 Other (specify) 589.42 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 25 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Ms Olivia O'Nest Date of Receipt Mailing Address 191 Foxhill Ln 30 2014 09 City Zip Code State Transaction ID: SA11AI.38729 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing C 140.00 federal political committee. Contribution Name of Employer Occupation DDOS HCR Manor Care, LLC. Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Diane Olans Date of Receipt Mailing Address 3362 Fox Hunt Drive 09 30 2014 City State Zip Code Transaction ID: SA11AI.38727 Palm Harbor FL 34683 Amount of Each Receipt this Period FEC ID number of contributing C 497.00 federal political committee. Contribution Name of Employer Occupation HCR Manor Care, Inc. Sr. Manager of Clinical Services Receipt For: Aggregate Year-to-Date ▼ Primary General 497.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Michael Orinoco Date of Receipt Mailing Address 1361 Bobby Lane 30 09 2014 City State Zip Code Transaction ID: SA11AI.38730 OH Westlake 44145 Amount of Each Receipt this Period FEC ID number of contributing 207.90 С federal political committee. Contribution Name of Employer Occupation Administrator HCR Manor Care, LLC. Receipt For: Aggregate Year-to-Date ▼ Primary General 356.40 Other (specify) 844.90 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 26 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Nadja Papillon Date of Receipt Mailing Address 5044 NW 90th Terrace 30 2014 09 City State Zip Code Transaction ID: SA11AI.38733 FL **Coral Springs** 33067 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Contribution Name of Employer Occupation Administrator HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 224.34 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David Parker Date of Receipt Mailing Address 2154 Tremont Road 09 30 2014 City State Zip Code Transaction ID: SA11AI.38734 OH Columbus 43212 Amount of Each Receipt this Period FEC ID number of contributing C 700.00 federal political committee. Contribution Name of Employer Occupation HCR.ManorCare, Inc. VP Assistant General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 1788.42 Other (specify) Full Name (Last, First, Middle Initial) c. Richard A Parr II Date of Receipt Mailing Address 2253 Gray Fox Court 30 09 2014 City State Zip Code Transaction ID: SA11AI.38735 MI Ann Arbor 48103 Amount of Each Receipt this Period FEC ID number of contributing 1346.10 С federal political committee. Contribution Name of Employer Occupation VP - General Counsel & Secretary HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 2307.60 Other (specify) 2106.10 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

	Statements may not be sold or used by any pers name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Brian W Perry  Mailing Address 450 Strafer Street  City Cincinnati  FEC ID number of contributing federal political committee.  Name of Employer  HCR ManorCare  Receipt For:  Primary General Other (specify)	State Zip Code OH 45226  C  Occupation AVP-Government Relations  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / D
Full Name (Last, First, Middle Initial)  Tracy L Peterson  Mailing Address 6865 Poplar Drive  City  Ypsilanti  FEC ID number of contributing federal political committee.  Name of Employer  HCR ManorCare  Receipt For:  Primary General Other (specify)	State Zip Code MI 48197  C  Occupation Administrator  Aggregate Year-to-Date ▼  432.84	Date of Receipt  09 30 2014  Transaction ID: SA11AI.38738  Amount of Each Receipt this Period  165.06  Contribution
Full Name (Last, First, Middle Initial)  Eliza Rapp  Mailing Address 428 Grove Ave  City  Mohnton  FEC ID number of contributing federal political committee.  Name of Employer  HCR ManorCare  Receipt For:  Primary  General  Other (specify)	State Zip Code PA 19540  C  Occupation Senior Case Manager  Aggregate Year-to-Date ▼  210.00	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	505.06
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full)  HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Mrs. Mary T. Reagan  Mailing Address 925 Main Street		Date of Receipt
		09 30 2014
City	State Zip Code	Transaction ID : SA11AI.38741
Bethlehem	PA 18018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer	Occupation	Contribution
HCR Manor Care, Inc.	Administrator - Easton	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Barbara Reigel	- '	Date of Receipt
Mailing Address 112 Center Street		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	09 30 2014 Transaction ID : \$41141 39743
Bridgeport	PA 19405	Transaction ID : SA11AI.38742  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	111.52
Name of Employer	Occupation	Contribution
HCR Manor Care, Inc.	Mobile ADNS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Teal-to-Date ▼  336.64	
Full Name (Last, First, Middle Initial) Patricia B Richards	I	Date of Receipt
Mailing Address P.O. Box 754		09 30 2014
City Shady Spring	State Zip Code WV 25918	Transaction ID : SA11AI.38743
Shady Spring	WV 25918	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	185.78
Name of Employer	Occupation	Contribution
HCR Manor Care, Inc.	Area Human Resource Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	467.95	
SUBTOTAL of Receipts This Page (optiona	<u> </u>	472.30

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Use separate schedule(s)	(check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	12	
	13 14	15	ີ <sub>16</sub> Γ	717

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Damian M Rodgers  Mailing Address 4647 Calico Court  City	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Monclova	OH 43542	Transaction ID : SA11AI.38745
FEC ID number of contributing federal political committee.  Name of Employer	C	Amount of Each Receipt this Period  135.00  Contribution
	Legal Counsel	
HCR Manor Care, Inc.  Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  303.00	
Full Name (Last, First, Middle Initial)  3. David R Roth  Mailing Address 5257 Bentwood Drive		Date of Receipt
City	State 7's Code	09 30 2014
City Mason	State Zip Code OH 45040	Transaction ID : SA11AI.38746
FEC ID number of contributing federal political committee.	C 45040	Amount of Each Receipt this Period
Name of Employer HCR ManorCare Inc.	Occupation Director Of Planning	Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  759.80	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2423 Heather Glen		09 30 _ 2014 _
City Maumee	State Zip Code OH 43537	Transaction ID : SA11AI.38747  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	413.28
Name of Employer	Occupation	Contribution
HCR.ManorCare, Inc.	Director of Corporate Communications	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	992.15	
SUBTOTAL of Receipts This Page (optional)		871.33
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 30 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Mary Jane Ruppert Date of Receipt Mailing Address 603 North Blackhoof St. 30 2014 09 City Zip Code State Transaction ID: SA11AI.38749 OH Wapakoneta 45895 Amount of Each Receipt this Period FEC ID number of contributing C 161.52 federal political committee. Contribution Name of Employer Occupation Sr Dir 4H Compliance and Edu HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 411.18 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mark Schroepfer Date of Receipt Mailing Address 2328 Bonnie Brae 09 30 2014 City State Zip Code Transaction ID: SA11AI.38750 CA Santa Ana 92706 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Contribution Name of Employer Occupation HCR.ManorCare, Inc. Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Edward Schuch Date of Receipt Mailing Address 304 Adriana Court 30 09 2014 City State Zip Code Transaction ID: SA11AI.38751 PΑ Northhampton 18067 Amount of Each Receipt this Period FEC ID number of contributing 189.00 С federal political committee. Contribution Name of Employer Occupation Administrator HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 478.00 Other (specify) 500.52 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Timothy Slawinski  Mailing Address 2363 Coe Court  City Perrysburg  FEC ID number of contributing federal political committee.  Name of Employer Divisional Director OPS Sup  Receipt For: Primary General Other (specify)	State Zip Code OH 43551  C  Occupation General Manager - West Div & HHHH  Aggregate Year-to-Date ▼  260.00	Date of Receipt  09 30 2014  Transaction ID: SA11AI.38757  Amount of Each Receipt this Period  140.00  Contribution
Full Name (Last, First, Middle Initial)  Jennifer M Snider  Mailing Address 824 S Genoa Clay Center F  City Genoa  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare LLC  Receipt For:  Primary General Other (specify)	State Zip Code OH 43430  C  Occupation Managed Care Manager - CBO  Aggregate Year-to-Date   223.58	Date of Receipt  99 30 2014  Transaction ID: SA11AI.38758  Amount of Each Receipt this Period  93.38  Contribution
Full Name (Last, First, Middle Initial)  Laura M Stengel  Mailing Address 24228 East Arapahoe Place  City  Aurora  FEC ID number of contributing federal political committee.  Name of Employer  HCR Manor Care, Inc.  Receipt For:  Primary General  Other (specify)   Other (specify)	State Zip Code CO 80016  C  Occupation Administrator  Aggregate Year-to-Date  393.64	Date of Receipt  09 30 2014  Transaction ID: SA11AI.38759  Amount of Each Receipt this Period  181.68  Contribution
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	415.06
TOTAL This Period (last page this line numb	er only)	

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) A. Anthony J Stinson  Mailing Address 3 Lynnefield Court		Date of Receipt
City  Medford  FEC ID number of contributing federal political committee.  Name of Employer  HCR ManorCare Inc.  Receipt For:  Primary General Other (specify) ▼	State Zip Code NJ 08055  C  Occupation Administrator  Aggregate Year-to-Date ▼  300.00	7 Transaction ID : SA11AI.38760  Amount of Each Receipt this Period  150.00  Contribution
Full Name (Last, First, Middle Initial)  Colette Storck  Mailing Address 28490 Wynikako Ave  City  Millsboro  FEC ID number of contributing federal political committee.  Name of Employer  HCR Manor Care, LLC.  Receipt For:  Primary  General  Other (specify)	State Zip Code DE 19966  C  Occupation Administrator  Aggregate Year-to-Date ▼  592.72	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Laurie C StPierre  Mailing Address 2120 Addison  City Clermont  FEC ID number of contributing federal political committee.  Name of Employer  HCR Manor Care, Inc.  Receipt For:  Primary General Other (specify)	State Zip Code FL 34711  C  Occupation Director Case Management  Aggregate Year-to-Date ▼  442.30	Date of Receipt  M M M / D D / 2014  Transaction ID: SA11AI.38762  Amount of Each Receipt this Period  309.61  Contribution
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	649.99
TOTAL This Period (last page this line number	er only)	

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Mr. Eric Talbert  Mailing Address 7231 Stonewater Ct  City	State Zip Code	Date of Receipt  09 30 2014  Transaction ID: SA11AI.38765
Maumee	OH 43537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00  Contribution
Name of Employer	Occupation	Contribution
HCR Manor Care, Inc.  Receipt For:  Primary General  Other (specify) ▼	Div. Director of Operations Support  Aggregate Year-to-Date ▼  540.00	
Full Name (Last, First, Middle Initial)  Rami Ubaydi  Mailing Address 6519 Chatham Circle		Date of Receipt
City	State Zip Code	09 30 2014 Transaction ID - SA44A1 20774
Rochester Hills	MI 48306	Transaction ID : SA11AI.38771  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	538.44
Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Operations	Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1442.20	
Full Name (Last, First, Middle Initial)  C. Benjuiman Young	'	Date of Receipt
Mailing Address 7822 NE 24th Ct.		09 30 2014
City Vancouver	State Zip Code WA 98665	Transaction ID : SA11AI.38778  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	199.44
Name of Employer	Occupation	Contribution
HCR ManorCare	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	605.05	
SUBTOTAL of Receipts This Page (optional)		1037.88
TOTAL This Period (last page this line number	er only)	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial)  Julie A Yoxtheimer  Mailing Address 249 E Pearl St	Date of Receipt	
City Findlay	State Zip Code OH 45840	09 30 2014  Transaction ID : SA11AI.38781  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	105.00 Contribution
HCR ManorCare Inc.  Receipt For:  Primary General  Other (specify) ▼	Sr Reimbursement Manager  Aggregate Year-to-Date ▼  270.00	
Full Name (Last, First, Middle Initial)  Cynthia M Zalewski  Mailing Address 3845 Drummond Rd		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Toledo  FEC ID number of contributing federal political committee	State Zip Code OH 43613	Transaction ID : SA11AI.38783  Amount of Each Receipt this Period  403.83
federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For:	Occupation Senior Attorney	Contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 980.79	
Full Name (Last, First, Middle Initial)  Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer  Receipt For:  Primary General  Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	•	508.83
TOTAL This Period (last page this line number	only)	24201.20

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 35 OF 44 (check only one)				
	Detailed Summary Page	11a   11b   11c   12 13   14   15   X   16   17				
	Statements may not be sold or used by any pene name and address of any political committee	erson for the purpose of soliciting contributions				
HCR MANOR CARE PAC						
Full Name (Last, First, Middle Initial)  CANTOR FOR CONGRESS  Mailing Address P. O. Box 17813		Date of Receipt				
City	State Zip Code	08 18 2014 Transaction ID : SA16.38539				
Richmond	VA 23226	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C C00355461	4033.50				
Name of Employer	Occupation	Contribution Refund				
Receipt For: 2014  Primary ☐ General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4033.50					
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Name of Employer	Occupation					
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Name of Employer	Occupation					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼					
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TOTAL This Period (last page this line numbe	r only)	4033.50				

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S	CHEDULE B (FEC Form 3X)				FOR	LINE	NUMBI	ER:				PAG	E 36	OF	= 44
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$ \rangle$	HCR MANOR CARE PAC														
	Full Name (Last, First, Middle Initial)														
Α.	The Huntington National Bank						Date	of [	Disbu	rse			YYY	Y	
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	Purpose of Disbursement						Amo	ount o	of Ea	ch	Disł	oursem	ent this	s Pe	eriod
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В.	The Huntington National Bank						Date	of [	Disbu	rse	mer	nt			
	Mailing Address P.O. Box 5065							)8	/	0		/ Y	2014		
	City	State	Zip Code								_				
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	Candidate Name			С	ategor Type	ry/		Ξ	,	Ι	Ξ	7		24.9	95
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Ο.	The Huntington National Bank														
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:		PAGE 3	38 OF	44
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NAME OF COMMITTEE (In Full)							
HCR MANOR CARE PAC							
Full Name (Last, First, Middle Initial)							
A. The Huntington National Bank	The Huntington National Bank					YY	,
Mailing Address P.O. Box 5065			09	16	_201	14	
City	State Zip Code		Transas	tion ID . S	B21B.38577	,	
Cleveland	OH 44101-0065		Transac	נוטוו ווטו: ס	DZ I D.303 <i>i i</i>		
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President	Other (specify) ▼						
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ь.			Date of D	isburseme			
Mailing Address			M I M	/ D D	/ Y Y	Y	
City	State Zip Code						
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President	Other (specify) ▼						
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Senate	Primary General						
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 39 OF 44
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HCR MANOR CARE PAC				
/ HOR WINGTON OF THE FINO				
Full Name (Last, First, Middle Initial)				
A. BECERRA FOR CONGRESS	Date of Disbursemer	nt		
Mailing Address P.O. Box 261060			09 12	2014
Mailing Address F.O. Box 201000			09 12	2014
City	State Zip Code		Transaction ID - Cl	222 20542
Los Angeles	CA 90026		Transaction ID : SI	323.38343
Purpose of Disbursement Contribution			Amount of Fools Diel	aa. this Daviad
Candidate Name			Amount of Each Dist	oursement this Period
Candidate Harris		Category/ Type		1000.00
Office Sought: House Disburser	nent For: 2014	.,,,,		
Senate	Primary			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)  B. CHRIS COONS FOR DELAWARE			Data of Diahuraamar	- <del>1</del>
B. CHRIS COONS FOR DELAWARE			Date of Disbursemer	
Mailing Address PO BOX 9900			08 12	2014
	State Zip Code		Transaction ID : SI	B23.38531
NEWARK Purpose of Disbursement	DE 19714			
Contribution			Amount of Each Disk	oursement this Period
Candidate Name		Category/		
		Type		1500.00
Office Sought: House Disburser	nent For: 2014			
Senate	Primary General			
President State: DE District: 00	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. DEMOCRATIC CONGRESSIONA		/ITTEE	Date of Disbursemer	nt
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Mailing Address 430 SOUTH CAPITOL STREET, S	E		08 08	2014
2ND FLOOR				
City : WASHINGTON	State Zip Code DC 20003		Transaction ID : SI	B23.38530
Purpose of Disbursement	20003			
Contribution		11	Amount of Each Disk	oursement this Period
Candidate Name		Category/		
		Type		5000.00
	ment For: 2014			
Senate President	Primary General			
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NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC			
Full Name (Last, First, Middle Initial) - DEMOCRATIC SENATORIAL CA	MPAIGN COMMI	ITEE	Date of Disbursement
Mailing Address 120 MARYLAND AVENUE NE			09 12 / 2014
City WASHINGTON	State Zip Code DC 20002		Transaction ID : SB23.38545
Purpose of Disbursement	2002		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	5000.00
Office Sought: House Disburse Senate President State: District:	ment For: 2014 Primary	al	
Full Name (Last, First, Middle Initial)  FRIENDS OF JOHN THUNE  Mailing Address PO BOX 841		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
SIOUX FALLS	State Zip Code SD 57101		Transaction ID : SB23.38521
Purpose of Disbursement Contribution Candidate Name		Cotomony	Amount of Each Disbursement this Period
	ment For: 2016 Primary General Other (specify)	Category/ Type	1000.00
Full Name (Last, First, Middle Initial)			Date of Disbursement
· IOWA HEALTH PAC		I	
Mailing Address 1775 90th St			09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1775 90th St  City West Des Moines Purpose of Disbursement	State Zip Code IA 50266		
Mailing Address 1775 90th St  City West Des Moines	·	Category/	09 12 2014
City West Des Moines Purpose of Disbursement Contribution Candidate Name	·	Type	Transaction ID : SB23.38544  Amount of Each Disbursement this Period

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 41 O	F 44
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b	22 X 23 24 25 28c 29	26 30b
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NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,			
HCR MANOR CARE PAC				
/ 1131(11), 1131(3), 11(21), 13				
Full Name (Last, First, Middle Initial)				
A. OHIO REPUBLICAN PARTY STATE CEN	Date of Disbursement			
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Maining Address 211 G. Fill THOTALET			00 10 2014	
City	State Zip Code		Transaction ID : SB23.38547	
COLUMBUS	OH 43215		Transaction ib . 3523.36347	
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Senate	Primary X General			
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State: District:				
Full Name (Last, First, Middle Initial)  B. ROUNDS FOR SENATE			Date of Disbursement	
B. ROUNDS FOR SENATE			M M / D D / Y Y Y	V
Mailing Address PO BOX 250			07 29 2014	'
City	State Zip Code		Transaction ID : SB23.38522	
PIERRE Purpose of Disbursement	SD 57501			
Contribution			Amount of Each Disbursement this Pe	eriod
Candidate Name		Category/		
		Type	1000.	00
	ement For: 2014			
Senate President	Primary General			
State: SD District: 00	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. STABENOW FOR US SENATE			Date of Disbursement	
			M M / D D / Y Y Y	Υ
Mailing Address P.O. BOX 4945			08 14 2014	
City	State Zip Code			
EAST LANSING	MI 48826		Transaction ID : SB23.38535	
Purpose of Disbursement				
Contribution			Amount of Each Disbursement this Pe	eriod
Candidate Name		Category/	5000.	00
Office Sought: House Disburs	ement For: 2018	Туре	7	
Senate	Primary General			
President	Other (specify)			
State: MI District: 00				
SUBTOTAL of Disbursements This Page (optional)			7500.0	00
TOTAL THE BOARD AND THE TOTAL	LA			
TOTAL This Period (last page this line number on	y)			

SCHEDULE B (FEC Form 3X)	Hen compared as for distance (	FOR LINE	TOWNDETT.	PAGE 42 OF 44
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		25 26
	Detailed Summary Page	210	22 X 23 24 28a 28b 28	
Any information copied from such Reports and State	ments may not be sold or use	d by any perso	on for the purpose of solici	ting contributions
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
HCR MANOR CARE PAC				
Full Name (Last, First, Middle Initial)				
A. WYDEN FOR SENATE			Date of Disbursement	
Mailing Address 123 NE 3RD SUITE 321			07 01	2014
City PORTLAND	State Zip Code OR 97232		Transaction ID : SB23	.38280
Purpose of Disbursement	517 9123Z			
Contribution			Amount of Each Disburs	sement this Period
Candidate Name		Category/		5000.00
Office Sought: House Disburse	ement For: 2016	Type		
Senate Session	Primary General			
President	Other (specify) ▼			
State: District:  Full Name (Last, First, Middle Initial)				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
			M M / D D /	Y Y Y Y
Mailing Address				
City	State Zip Code			
•	1			
Purpose of Disbursement			Amount of Each Disburs	sement this Period
Candidate Name		Category/		
		Type		
Office Sought: House Disburse Senate	ement For:  Primary General			
President	Other (specify)			
State: District:	ı			
Full Name (Last, First, Middle Initial)			Data of District	
<b>.</b>			Date of Disbursement	Y Y Y Y
Mailing Address			M M / D D /	7 - 7 - 7 - 7
City	State 7in Code			
City	State Zip Code			
Purpose of Disbursement				
Candidate Name			Amount of Each Disburs	sement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburse	ement For:	) I		
Senate	Primary General			
State: District:	Other (specify) ▼			
State.				
SUBTOTAL of Disbursements This Page (optional).				5000.00
				20000 00
TOTAL This Period (last page this line number only	/)	·····•		28000.00

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such or or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such or for commercial purposes of soliciting or for committee to Solicit contributions from such or for the purpose of soliciting or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such or for soliciting or for for committee to solicit contributions from such or for soliciting or for for soliciting or for for solicit contributions from such or for soliciting or for for soliciting or for for soliciting or for for soliciting or for for solicit contributions from such or for solicitions from such or for solicitions from such or for solicitions from such or for solici	
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NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC  Full Name (Last, First, Middle Initial)  A. Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Purpose of Disbursement  Candidate Name  Office Sought: House Disbursement For: Senate Primary General Other (specify)  Mailing Address 7027 State Route 350 West PO Box 343  City Gardy General Other (specify)  Mailing Address 7027 State Route 350 West PO Box 343  City Category/ Type  Date of Disbursement  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Disbursement  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Category/ Type  Office Sought: House OH 45113  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Transaction ID: SB29.3853  Amount of Each Disbursement  Contribution  Category/ Type  Office Sought: House President Senate President State: District:  Full Name (Last, First, Middle Initial)	contributions
HCR MANOR CARE PAC  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Transaction ID: SB29.3852  Amount of Each Disbursement  State: District:  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code OH 45113  Date of Disbursement  Date of Disbursement  Amount of Each Disbursement  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Di	committee.
Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City Clarksville OH 45113  Purpose of Disbursement  Candidate Name  Office Sought: President State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code OH 45113  Amount of Each Disbursement  Category/ Type  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Disbursement  Category/ Type  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Office Sought:  OH 45113  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Office Sought: Purpose of Disbursement  Contribution  Candidate Name  Office Sought: President Senate President Senate Primary General Other (specify)  Other (specify)  Other (specify)  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Office Sought: Primary General Other (specify)  Transaction ID: SB29.3853	
Mailing Address 7027 State Route 350 West PO Box 343  City Clarksville OH OH OT OT OT Senate President State:  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Disbursement  Category/ Type  Other (specify)  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Disbursem	
Mailing Address 7027 State Route 350 West PO Box 343  City Clarksville OH 45113  Purpose of Disbursement  Candidate Name  Candidate Name  Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City Clarksville OH 45113  Date of Disbursement  Date of Disbursement  Transaction ID: SB29.3852  Amount of Each Disbursement  Date of Disbursement  Transaction ID: SB29.3853  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Transaction ID: SB29.3853  City Clarksville OH 45113  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)	
Mailing Address 7027 State Route 350 West PO Box 343  City Clarksville OH 45113  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City Clarksville OH 45113  Date of Disbursement  Date of Disbursement  Transaction ID: SB29.3853  Amount of Each Disbursement  Date of Disbursement  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Office Sought: House Senate Primary Other (specify)  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Office Sought: Other (specify)  Other (specify)  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Other (specify)  Transaction ID: SB29.3853	Y   Y   Y
Carksville Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Category/ Type  Date of Disbursement  Transaction ID : SB29.3852  Amount of Each Disbursement  Date of Disbursement  Transaction ID : SB29.3852  Amount of Each Disbursement  Category/ Type  Transaction ID : SB29.3852  Amount of Each Disbursement  Category/ Type  Office Sought: House Disbursement For: 2014  Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	2014
Candidate Name  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Category/ Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Disbursement For: 2014  Senate Primary General Other (specify) ▼  Amount of Each Disbursement  Transaction ID: SB29.3853  Amount of Each Disbursement  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Senate President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	26
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Primary General Other (specify) ▼  Transaction ID: SB29.3853  Amount of Each Disbursement Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	.0
Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Category/ Type  Office Sought: House Disbursement For: 2014  Senate Primary General Category/ Type  Office Sought: House Disbursement For: 2014  Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	nt this Period
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code OH 45113  Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Candidate Name  Disbursement For: 2014  Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	1500.00
State: District:  Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	
Full Name (Last, First, Middle Initial)  Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Primary General Office Sought: District:  Full Name (Last, First, Middle Initial)  Purpose of District:  Full Name (Last, First, Middle Initial)	
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- Committee to Elect Cliff Rosenberger  Mailing Address 7027 State Route 350 West PO Box 343  City State Zip Code Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Senate Primary Senate President State: District:  Full Name (Last, First, Middle Initial)  Date of Disbursement   Amount of Each Disbursement  Category/ Type  Category/ Type  Other (specify) ▼  Full Name (Last, First, Middle Initial)	
Mailing Address 7027 State Route 350 West PO Box 343  City Clarksville OH 45113  Purpose of Disbursement Contribution  Candidate Name  Office Sought:  House President President State:  District:  Full Name (Last, First, Middle Initial)  Os 14  Transaction ID: SB29.3853  Amount of Each Disbursement Category/ Type  Category/ Type  Other (specify) ▼  State:  Full Name (Last, First, Middle Initial)	
Clarksville  Purpose of Disbursement Contribution  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President President  State: District:  Full Name (Last, First, Middle Initial)	2014
Purpose of Disbursement Contribution  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President  State: District:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement  Category/ Type  Category/ Type  Other (specify) ▼  Full Name (Last, First, Middle Initial)	34
Candidate Name  Category/ Type  Office Sought:	
Office Sought:    House	nt this Period
Senate Primary Other (specify)  State:  District:  Full Name (Last, First, Middle Initial)  Primary Other (specify) ▼	500.00
President State: District: Other (specify) ▼  Full Name (Last, First, Middle Initial)	
State: District:  Full Name (Last, First, Middle Initial)	
· SENATE REPUBLICAN CAMPAIGN COMMITTEE   Date of Disbursement	
	YIYIY
	2014
City State Zip Code Transaction ID : SP20 38E5	
LANSING MI 48901 Transaction ID : SB29.3853	33
Purpose of Disbursement Contribution	
Candidate Name  Category/  Category/  Amount of Each Disbursement	
Type	2000.00
Office Sought:  House  Disbursement For: 2014  Senate  Primary  Other (specify)	
State: District: Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	4000.00

SCHEDULE B (FEC Form 3X)		LOD LINE	NUMBER: PAGE 44 OF 44				
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE I	TOMBELL.				
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	Detailed Suffilliary Fage	27	28a 28b 28c X 29 30				
Any information copied from such Reports and Staten							
or for commercial purposes, other than using the name	ne and address of any political	committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
HCR MANOR CARE PAC							
Full Name (Last, First, Middle Initial)							
TOM WOLF FOR GOVERNOR			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 53 EAST NORTH STREET		07 23 2014					
-	SUITE 3						
City S	State Zip Code PA 17401		Transaction ID : SB29.38518				
Purpose of Disbursement	17401						
Contribution			Amount of Each Disbursement this Period				
Candidate Name	I	Category/	0500.00				
		Type	2500.00				
	nent For: 2014						
Senate   President	Primary General						
State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
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Candidate Name	,	Category/					
000		Type					
Office Sought: House Disburser							
Senate President	Primary General Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)			2500.00				
TOTAL This Period (last page this line number only)			6500.00				